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——— Theme: ——

### SOCIAL MEDIA AND DERMATOLOGY PRACTICE: CHALLENGES AND OPPORTUNITIES

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### **NJD 2023 BOOK OF ABSTRACTS**

SOCIAL MEDIA/ **TELEDERMATOLOGY** 

001: Whatsapp for Health Education: Empowering People with Albinism through **Digital Intervention** 

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Background: Oculocutaneous albinism is a congenital disorder that is characterized by hypopigmentation involving the skin, hair, and eyes, due to lack of production of melanin. Skin complications that can arise in persons with albinism (PWA) include solar keratosis and skin cancers which increase morbidity. Educating PWAs is an important part of the management of albinism and in this era of advancing information technology, WhatsApp applications can serve as an interventional tool for digital health education.

Objective: The main objective of this study is to assess the impact of WhatsApp as a tool for providing health education among PWAs.

**Methods:** The design of the study was interventional. The intervention consisted of weekly health

education sessions conducted in a WhatsApp group over 4 weeks. These topics discussed are knowledge of albinism, sun protection practices, use of sunscreen, and myths of albinism. An online questionnaire was filled out before and after the intervention. Mann - Whitney U test was used to compare the pre- and post-knowledge scores. Spearman's correlation was used to correlate data.

Results: The mean age of study participants was 28.28 years. The number of participants in the pre and post-intervention period were 140 and 66 respectively. A statistically significant increase in knowledge was seen in post-intervention (p = 0.01).

Conclusion: WhatsApp is an effective tool for educating PWAs and can act as an alternative to the conventional methods of health education. It shows promising outcomes irrespective of the health literacy level of PWAs.

Keywords: WhatsApp, Oculocutaneous Albinism, Health education, Teledermatology, Digital Health

002: The Teledermatology Experience in Nigeria: A Perspective Study Over One Year

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Background: Teledermatology has existed in informal forms for several years, but the COVID-19



pandemic underscored the importance of out-ofclinic services and the unmet need for dermatologists in Nigeria. This paper presents findings from a 1-year study (March 2021-March 2022) on the pattern of dermatoses and epidemiological features of patients seeking Teledermatology services from a Nigerian Dermatologist. Consultations were via secure instant messaging platforms and health technology to improve healthcare delivery.

**Methods:** The study analyzed data on 130 new Teledermatology patients including age, gender, location, skin type, lightening practices, and diagnoses. Diagnoses were mostly clinical, with support from laboratory investigations and histopathology when necessary.

**Results:** The male-to-female ratio of patients was 1: 3.1. The mean  $\pm$  standard deviation age was 27.3  $\pm$  8.3 years and 83.8% of patients resided in Nigeria. A total of 38 diagnoses were recorded and most patients (60.2%) had more than one. Overall, the five most frequent dermatologic complaints were acneiform disorders: 79 (38.7%), pigmentary disorders: 77 (37.7%), allergic/hypersensitivity disorders: 20 (9.8%), cosmetic dermatology: 10 (4.9%) and infections: 9 (4.4%).

Conclusions: Teledermatology is a valuable tool for meeting the dermatological needs of underserved populations, particularly given the current estimated ratio of one dermatologist to one million people in Nigeria. The use of tailored technology platforms over instant messaging services provides a fast, secure, and flexible method for consultation. Consequently, Teledermatology has the potential to enhance access to dermatologists and should be integrated into the Nigerian healthcare system.

**Keywords:** Teledermatology, Telemedicine, Online Consultation, Social Media, Dermatology

003: Analysis of Nigerian Based Skincare and Dermatology Content Creators on Instagram

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**Introduction:** The internet has become the most popular way to access information, and social media

has made it even more engaging. Social media is a network that enables the sharing of information with millions of users worldwide. Lately, the trend has shifted towards using social media as a platform for education. Facebook, Twitter, Instagram, Snapchat, and TikTok are the most popular social media sites. (1) The credibility of those disseminating this information on public platforms is a concern. Social media has facilitated easier access to platforms where individuals can disseminate information to large audiences, frequently without conducting fact checks. Particularly worrisome is cosmetic-related health information because not everyone is qualified to provide advice on the subject, and while some advice can be harmless, others can have much more severe consequences. (2) Few studies have been conducted to characterize the qualifications of those who create popular dermatology-related content on social media. This research intends to do so on Instagram, with a particular emphasis on Nigerian-based content creators.

Methodology: This study analyzed the top 100 posts for 15 hashtags to determine which accounts produced the most popular and most viewed dermatology-related content. We also used the Google search engine to determine the most influential Instagram accounts based in Nigeria as related to dermatology and the skin. We recorded their credentials, account names, and engagement rates.

**Results:** The majority of accounts creating dermatologic content lacked medical credentials; the accounts with the highest followers were not medical professionals but were either promoters of whitening and organic products or skincare product vendors; and the engagement rate of medical professionals was lower than that of nonmedical professionals.

**Conclusion:** This study goes to show that dermatologists and physicians need to find a way to become more visible on social media platforms so we can counter this.

## 004: The Professional Use of Social Media among Dermatologists in Nigeria: Practice, Benefits and Risks

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Introduction: Social media use in all aspects of human life has been gaining ground, with more than half of the population using one or other form of social media technology. The ever-increasing number of social media users makes it a fertile ground for disseminating skin health education and reinforcing public skin health awareness. While research has shown that a large percentage of people turn to social media to seek health education, an increasing amount of information dissemination and trendsetters in dermatology are not dermatologists, with the attendant proliferation of incorrect and misleading information.

There is a need to increase the presence of dermatologists on social media for the right knowledge dissemination and reinforcement of skin health awareness. This survey examines the use of social media for professional use by dermatologists in Nigeria and the benefits and risks associated.

**Methods:** Respondents were interviewed using a pretested questionnaire containing their biodata and information about which social media they preferred to use, how long they spent on social media per day, and the perceived benefits and risks of social media use.

Results: A large proportion of respondents were female, 63.2% had used social media for more than 10 years and also used social media professionally, instagram was the most frequently used app (61%), while all respondents agreed that social media had numerous benefits, violation of patient-physician boundaries was the most important risk of social media use and lack of time to engage plus lack of policy guidelines was the most frequent reason given as an obstacle. A large proportion of respondents (84%) agreed on planning to increase their social media use in the future.

**Conclusion:** Social media as a professional tool has many benefits, and the provision of clear-cut policy guidelines to use may help increase the engagement of dermatologists online.

### 005: The Professional Use Of Social Media Among Nigerian Dermatologists: Practice, Benefits And Risks.

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Social media use in all aspects of human life has been gaining ground, with more than half of the population using one or more forms of social media technology. The ever-increasing number of social media users makes it a fertile ground for disseminating skin health education and reinforcing public skin health awareness.

Social media refers to websites or applications (apps) wherein the general public can create and distribute content, share photos and videos, and build social networks by interacting with other users in real-time. The impact of social media in broadening interpersonal connections, encouraging interphysician collaboration, and promoting learning is undebatable, while research has shown that a large percentage of people turn to social media to seek health education, an increasing amount of information dissemination and trendsetters in dermatology are not dermatologists, with the attendant proliferation of incorrect and misleading information. There is a need to increase the presence of dermatologists on social media for the right knowledge dissemination.

### 006: Leveraging On Teledermatology for Review of Family Tree in a Sporadic Case of Christ-Siemens Touraine Syndrome

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**Background:** Ectodermal dysplasias have been described for over a century. They constitute over 100 inherited disorders characterized by anomalies in at

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least two structures that are derived from the ectoderm (for example: nails, hair, sweat glands, and teeth). Ectodermal dysplasias usually occur in persons with a family history. The index case is that of a hydrotic ectodermal dysplasia with no family history.

The subject's relatives are however in various locations and the use of telecommunication gadgets and social media applications were utilized to analyze pictures and videos of the skin of his family members. This was a very valuable step in the review of this case. Genetic sequencing could not be done as there was no genetic record available to us.

There are two broad classifications of ectodermal dysplasias; hydrotic and hypohydrotic. The hydrotic variant is more common though the condition remains a rare one. There is the involvement of several genes. The defective gene results in a protean of manifestations in the primary organ involved (the skin and its appendages). The hypohydrotic/anhydrotic variant is also called Christ-Siemens Touraine syndrome while the hydrotic variant is known as Clouston syndrome. Ectodermal dysplasias are rare variants that are even much rarer.

A 5-year-old male presented to our Clinic with complaints of frequent bouts of fever, delayed eruption of teeth, and other complaints for which a diagnosis of Christ-Siemens Touraine syndrome was made.

### 007: Social Media as an Effective Tool for Skin Health Education: A Case Study of the Dermlink Virtual Skin NTDs Training

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**Background:** Social media platforms have emerged as powerful sources of information worldwide. While often associated with entertainment and political news, these platforms possess significant potential for disseminating various forms of health education, including skin health.

**Objectives:** In this case study, we aim to highlight the role of social media in the effective dissemination of skin health information using popular social media platforms. The barriers to social media use will also be discussed.

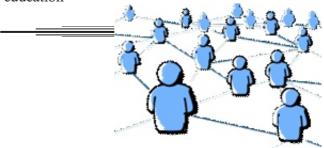
Methods: This was a cross-sectional study of health workers who registered for an online course using a virtual conference platform (Zoom) over three weeks, following information dissemination through popular social media platforms such as WhatsApp, Twitter, Facebook, Instagram, and LinkedIn using virtual posters and e-invitations. This study is part of the ongoing Virtual Skin Neglected Tropical Diseases (NTDs) training for health workers by the

Nigerian Association of Dermatologists from the International League of Dermatological Sciences (ILDS) DermLink Grant 2022/3.

**Results:** Over three weeks, the training received a total of 1,026 registrants from twenty-seven states across all six geopolitical zones of Nigeria. However, some participants were eventually unable to attend due to internet connectivity lapses.

Conclusion: Social media proves to be a valuable tool for skin health information dissemination and education, as demonstrated by the successful implementation of the Virtual Skin NTDs training. Recognizing the potential of social media in advancing dermatology education and utilizing it can significantly improve skin health outcomes in Nigeria and Africa as a whole.

**Keywords:** social media, skin NTDs, dermatology education



#### DERMATOLOGY EDUCATION

### 008: Poetry: Response of Medical Students to Use in Teaching Dermatology

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Background: Poetry is one of the major categories of literature which is characterized by having a meter form, rhyme, rhythm, and other figurative expression. It can be incorporated in other forms of literature such as prose and drama as it was the focus of the World Poetry Day 2023 theme with the theme: 'Be a Poet even in Prose'. Poetry is being encouraged even in the teaching of medicine particularly in countries such as Australia, the United States of America, and the United Kingdom. This pilot study focused on the response of medical students to poems that were part of the lecture slides.

Method: Short excerpts of poems taken from a collection of poems 'Scar Songs' formed part of the lecture slides for two different topics on two different days during the dermatology posting for Year 5 medical students. The response of the medical students was judged by a voice note, hand count, body language, and attention paid to the poem during the reading.

**Results:** An average of 75 % raised their hands in the armature that they enjoyed the class. There were positive emotions such as smiles and laughter by the students. On the lecture assessment form a student stated the use of poetry aided his understanding.

**Conclusion:** The inclusion of poems in dermatology lectures was received with positive emotions by most of the medical students. Poetry is a useful tool in the teaching of skin disorders.

**Keywords:** Dermatology, Education, Medical, Poetry, Student

009: Assessment of Medical Students' Perception of Dermatology Lectures: Focus on Pioneer Medical Students

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**Background:** Students' choice of specialization has been noted to be influenced by the amount of exposure they have to a particular topic. This can come via the books they read and the amount of understanding they receive from being taught during tutorials and lectures. The foundation of understanding dermatology depends on the extent of the amount of exposure they have as students.

**Aims:** This study aims to find out the general perception of pioneer medical students regarding the dermatology lectures received and whether this has influenced them in considering dermatology as a choice of specialization.

**Methods:** Pioneer students of two new medical schools in Rivers State were given a self-administered questionnaire to seek the student's perception of the lectures received after oral consent was sought from participants.

Results: There was a high response (85.3%) rate to filling out the questionnaire. Females consisted of 64% of the total students. A majority were single within the 18-24 years age group. A majority, 69.3% of the total pioneer medical students found the lectures interesting, 60% of the students understood what was taught most times, 97.3% had their knowledge increased, and 81.3% had gained more confidence however only 18.6% considered dermatology as a choice of specialization. A similar fraction (18.6%) was influenced by the lectures to make this decision with a greater majority (78.6%) of these persons positively considering dermatology as a choice of specialization.

Conclusion: Dermatology lectures received by the pioneer students were found to be interesting, and increased knowledge and confidence in the



management of skin in the majority of them however only a few considered dermatology as a choice of specialization. Overall, this choice was not influenced greatly by the lectures they received except for the few who considered specializing in dermatology.

**Keywords:** Assessment, Dermatology, Medical, Students, Perception

## 010: Behind the White Coat: Exploring Gambian Students' Perspective on Dermatology And Dermatologists

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**Background:** Perceptions of dermatology and dermatologists by medical students can vary widely depending on their personal experiences, exposure to the specialty, and cultural and societal beliefs. The lack of emphasis on dermatology in the medical curriculum can lead to misconceptions in the field. Therefore, medical students need to have a well-rounded understanding of dermatology and the role of dermatologists in the healthcare system.

**Aim:** Our study aimed to assess the medical students' perceptions of dermatology and dermatologists.

Methods: The study design was cross-sectional and was conducted in the School of Medicine and Allied Health Sciences, University of the Gambia, Banjul, Gambia. Participants were 700-level medical students undergoing their dermatology training. An online questionnaire was created which they filled out on both the first and last day of their dermatology training.

**Results:** A total of 72 responses were received in this research. The mean age of respondents was 25.69 years. Concerning their perceptions of dermatology, there was a statistically significant improvement in the etiology and treatment modalities of skin diseases at the end of their training. Additionally, a statistically significant increase was observed in the beliefs that

dermatologists had high status, a high degree of responsibility, and free time for their patients after dermatology training.

Conclusion: Overall, there was a paradigm shift in the perceptions of the medical students towards dermatology and dermatologists. However, there is room for improvement in terms of reviewing the dermatology curricula, changing the pattern of training, and the employment of information technology.

## 011: Perception and Attitude of Medical Students to Dermatology Subspecialty in Tertiary Institutions in South-East Nigeria

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Introduction: Medical schools are responsible for delivering medical teaching to future physicians. Previous research has demonstrated that the teaching of dermatology in medical schools is highly variable, leading to low confidence among junior doctors in basic knowledge and skills such as skin lesion description.5,6 Early exposure to training in dermatology during medical school will enhance the preparation of future physicians to provide care for patients with skin disease. This study is aimed at determining the perception and attitude of medical students in training on dermatology as a subspecialty in tertiary institutions in Abia State South-East Nigeria.

**Methods:** This was a questionnaire-based descriptive cross-sectional study carried out on medical students in both the state-owned and private universities in Abia State.

**Results:** Three hundred and twenty-two (322) medical students participated in this study. The age range of respondents was between 20-37 years with a mean age + SD of 24.58 + 2.98.

There were more females 181 (56.2%) than males 141 (43.8%). Out of the 322 respondents 96.6% have heard of dermatology, 87.6% knew it was a

subspecialty, 52.5% agreed to have been taught dermatology and 59.8% said they were taught in their final year.

About 32.9% have seen dermatology cases managed, 91% did not prefer dermatology as a subspecialty, 90.7% agreed that dermatology should be taught to all medical students, 85.7 % agree that they will have a better understanding of dermatology practice if taught and 81.4% agreed to confidence in managing simple dermatology cases if taught.

Conclusion: Improving baseline skills in dermatology for medical students through dermatology education will lead to an increased knowledge base and better management of skin diseases during their practices upon graduation.

**Keywords:** Perception, medical students, dermatology

#### BIOLOGICS/THERAPEUTICS

### 012: BIOLOGICS IN DERMATOLOGY: AN UPDATE

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Background: Biologics are increasingly used in dermatological practice. More molecules are increasingly approved for use in a wide range of dermatological and non-dermatological disorders. Some of the biologics are important for causing a wide range of cutaneous adverse effects. As biosimilars become increasingly more affordable, more patients will be able to afford these medications. A thorough knowledge of these biologic medications including their adverse effect profiles is necessary for optimal dermatology practice in the years ahead.

**Methods:** A literature search on the subject using several search engines was conducted.

**Results:** Biologics in current use have been grouped into 7 classes viz tumour necrosis factor-a inhibitors, interleukin inhibitors, B-cell inhibitors, T-cell inhibitors, immune checkpoint inhibitors, interferon inhibitors, and a heterogenous group of all other uncategorized biologics. A review of these biologics

including approvals, indications, and adverse effect profiles has been undertaken.

**Conclusion:** Biologics are increasingly being used in dermatology and providing excellent remission of many inflammatory and malignant skin diseases. Checkpoint inhibitors are notorious for many cutaneous adverse effects.

**Keywords:** Biologics, dermatology, update, tumour necrosis-an inhibitor, interleukin inhibitors

### 013: Therapeutic Advances in Dermatology: The Past Five Years

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**Background:** The past decade has witnessed an unprecedented addition of new therapeutic measures to dermatology care. Over the past five years, some of the older medications have gone out of favour primarily because of comparably lower potency or higher risk of adverse effects. Within this period, newer molecules with greater potency and lesser risks of adverse effects have been introduced into clinical dermatological practice.

**Methods:** A comprehensive search of literature on the subject was conducted and newer therapeutic molecules introduced over the past five years were identified.

**Results:** New medications licensed for use over the past five years include more potent biologics. Many small molecules for a wide range of dermatological disorders have also come into dermatological practice including Janus kinase inhibitors, phosphodiesterase inhibitors, androgen receptor inhibitors, and many more. Many other drugs are on the verge of being licensed.

**Conclusion:** The increasing number of new medications for the treatment of various dermatological disorders allows more options or even options where no reasonable ones existed previously. Dermatologists need to keep abreast of these newer options for therapy even though a small proportion of the population may afford them in Nigeria where payment for care is majorly out-of-pocket.



**Keywords:** Biologics, dermatology, update, Janus kinase inhibitors, phosphodiesterase inhibitors

### 014: Biologic Therapy in Inflammatory Dermatoses: Focus on Psoriasis and Atopic Dermatitis

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Psoriasis and atopic dermatitis (AD) are common chronic inflammatory diseases of the skin, with enormous cutaneous and systemic disease burden and significant impact on the health-related quality of life of affected persons. Both diseases result from a complex interplay of factors, a significant one being immune dysregulation. Appreciable degrees of success have been recorded in the control of AD and psoriasis using a robust array of conventional, complementary, and alternative therapeutic agents; however, the new kids on the block are biologics, which have revolutionized the management of these diseases.

Biologics are agents synthesized from products of living organisms, with activities that target specific molecular processes. Compared to conventional anti-inflammatory agents that suppress the overall immune system, biologics act more precisely by targeting specific inflammatory cells and/or mediators in the immune pathway.

The successful use of biologics in the management of AD and psoriasis attests to an improved understanding of the pathophysiology of these dermatoses, which in the long run portends a greater likelihood of disease prevention.

A couple of biologics are approved for the treatment of moderate-to-severe psoriasis, and fewer for AD. Due to the observed better risk-benefit ratios compared to conventional topical and anti-inflammatory systemic medications, they have become the mainstay of therapy in certain regions; and research is ongoing for the development of newer biologics, some of which are at different stages of clinical trials. The use of biologics in the treatment of patients in Nigeria is gradually gaining momentum; however, the cost implication as an out-of-pocket health expenditure remains a major deterrent.

#### DERMOSCOPY

### 015: Dermoscopic features of Pityriasis Versicolor in University of Nigeria Teaching Hospital, Ituku-Ozalla, Enugu State

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**Background:** Pityriasis Versicolor [PV] is a common superficial fungal infection caused by organisms in the genus Malassezia. Patients often have hyperpigmented, hypopigmented, or erythematous macules and patches on the trunk, face, and proximal part of the upper limbs. Diagnosis can be made clinically; however, Wood's lamp examination, microscopy using potassium hydroxide [KOH], fungal culture, dermoscopy, and skin biopsy can be done to confirm the diagnosis. It is managed using antifungal agents. Dermoscopy is a noninvasive procedure that uses a handheld device to magnify and illuminate the skin. It can be used to visualize skin lesions in more detail than is possible with the naked eye. This can help identify subtle dermatological conditions, such as PV.

**Objective:** To assess dermoscopic features of Pitvriasis Versicolor.

Methodology: The study was carried out at the Skin Clinic of the University of Nigeria Teaching Hospital, Ituku-Ozalla, Enugu. It was a cross-sectional study. Patients with symptoms of PV such as hyperpigmented, hypopigmented, or erythematous macules and patches on the trunk, face, and proximal upper extremities were used. A total number of 113 individuals who met the inclusion criteria were consecutively recruited. Investigator-administered pretested questionnaires were used to obtain data. Patients' skin was examined in a well-lit room, followed by a dermoscopic examination. Data was analyzed using a statistical package for social science software (SPSS) version 23.

Results: There were more females affected than males with a ratio of 1.4:1. The most common dermoscopic finding in the study population was non-uniform pigmentation for both hypopigmented and hyperpigmented lesions, followed by perifollicular hyperpigmentation. The most common scaling pattern seen on dermoscopy was the patchy pattern in

hypopigmented lesions and the diffuse scaling pattern in hyperpigmented lesions. The most common vascular pattern seen on dermoscopy was the linear branching pattern in 69% of the participants.

Conclusion: Dermoscopy can be a useful tool in the diagnosis of PV. The dermoscopic features of PV can help to distinguish it from other skin conditions, such as tinea corporis, nummular eczema, and idiopathic guttate hypomelanosis.

## 016: Dermoscopic Patterns in Patients with Scabies in the University of Nigeria Teaching Hospital Ituku-Ozalla

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Introduction: Scabies is a highly contagious skin parasitosis caused by Sarcoptes scabiei var hominis.

The mode of transmission is by close physical contact with an infected person or contaminated material. Diagnosis can be made clinically and confirmed by light microscopic identification of the mites, larva, ova, or scybala in skin scrapings. It is managed using antihistamines and scabicidal agents. Dermoscopy is a noninvasive procedure that uses a handheld device to magnify and illuminate the skin. It can be used to visualize skin lesions in more detail than is possible with the naked eye. This can help identify subtle dermatological conditions, such as scabies.

**Methods:** This was a hospital-based cross-sectional study conducted at the dermatology clinic of UNTH, Enugu. A total of 170 patients were consecutively recruited into the study.

**Results:** The mean age of the patients was  $26.95 \pm 17.24$ , with more female participants (55.3%) than males (44.7%). The majority of the subjects (72.4%) had attained the secondary school level of education. Most of the patients were in the unemployed, student, and subsistence farming categories of occupational status. Direct visualization of the mite on dermoscopy was the most common finding in the study population at 86.9%, followed by the "delta wing jet" sign at 71.8%.

**Conclusion:** Dermoscopy is a useful tool in the diagnosis and follow-up of patients with scabies.

### PEDIATRIC DERMATOLOGY

017: Use of Moisturization in the Management of Lamellar Ichthyosis: A Case Report

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Background: Lamellar ichthyosis (LI) is a heterogeneous genetic disorder that is mainly inherited in an autosomal recessive pattern. LI presents at birth in a clear form with the characteristic collodion membrane (a parchment-like membrane) that covers the whole of the baby's body, which over the first weeks of life, is replaced by generalized brown to dark large plate-like scales that appear in a mosaic pattern. It may also be associated with minimal or no erythema, ectropion, and eclabium. There is currently no curative therapy for LI. The mainstay of treatment remains to alleviate symptoms, largely with the use of topical emollients and keratolytic agents such as urea, lactic acid, propylene glycol, tretinoin, and, in more severe cases, oral retinoids. Treatment is generally targeted at scale removal, restoring skin barrier function, and reducing trans-epidermal water loss (TEWL).

Case Summary: A 9-week-old male infant was brought to our dermatology clinic on account of generalized scaly skin lesions. The baby was observed to have presented at birth with a covering of the entire body by a taut translucent membrane which later developed into fissures and generalized plate-like scalings. There was also a history suggestive of bilateral ectropion and hair loss. Examination of the baby revealed generalized hyperpigmented thick scaly plaques worse on the trunk and distal limbs, bilateral ectropion, and generalized scalp hair loss (sparing the central frontoparietal area). The patient was managed with moisturizer and emollients (white soft paraffin and light liquid paraffin emollient \*E45 CREAM) with resultant marked clinical improvement in skin lesions



**Conclusion:** Lamellar ichthyosis is a disorder of keratinization that manifests with lifelong widespread scaling, which is associated with cosmetic disfigurement with a resultant negative psychosocial impact. Topical agents with moisturizing, keratolytic, and emollient properties are the main long-term treatment options.

## 018: Fixed Drug Eruption to Griseofulvin in a Child: A Case Report and Review Of Literature

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**Introduction:** Griseofulvin is an antifungal medication most commonly used to treat fungal infections of the scalp such as tinea capitis in children but can also be used to treat other fungal infections of the skin and nails that do not respond to topical agents. In addition to its effect on the liver, it is associated with Fixed Drug Eruption(FDE) which is rare, especially in children.

Case Report: We present a case of a 3-year-old boy with FDE following ingestion of griseofulvin used for the treatment of tinea capitis. The patient was successfully treated with an alternative antifungal, the use of oral antihistamines and topical emollients, vitamins, and zinc. No topical steroid was used.

**Discussion:** Fixed drug eruption (FDE) is described as skin lesions that appear in the same part of the body due to repeated exposure to a drug. Griseofulvin is implicated in cases of drug hypersensitivity and it causes phototoxic and photo-allergic eruptions as well as serum sickness-like-reaction, acute generalized exanthematous pustulosis, subacute cutaneous lupus erythematosus, and toxic epidermal necrolysis which are well documented in adults. Our patient had griseofulvin-induced urticaria which

metamorphosed into hyperpigmented macules and plaques ten days after taking the medication.

**Conclusion:** Fixed drug eruption to griseofulvin is a rare occurrence in African children and its cutaneous reaction is noteworthy. Griseofulvin though a mainstay of therapy for tinea capitis in children, an alternative is suggested in cases of fixed drug eruption.

#### HAIR/SCALP DISORDERS

019: Syphilitic Alopecia and its Close Mimic: Navigating Diagnostic Challenges

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**Background:** Syphilis is usually referred to as the "great mimicker" in dermatology due to its varied clinical presentations that are similar to a wide range of conditions. Syphilitic alopecia, a non-cicatricial alopecia, is an uncommon feature of secondary syphilis. It is a very close mimic of alopecia areata both clinically and on trichoscopy. Previous studies have described that the absence of exclamation mark hairs which is a hallmark of alopecia areata on trichoscopy is an important pointer to the diagnosis of syphilitic alopecia. Here, we report a case of syphilitic alopecia with exclamation mark hair on trichoscopy highlighting the diagnostic dilemma in differentiating between syphilitic alopecia and alopecia areata by scalp examination and trichoscopy and the role of a holistic evaluation in improving diagnostic accuracy.

Case Summary: We present a case of syphilitic alopecia in a 26-year-old male heterosexual with Human Immunodeficiency Virus (HIV) who presented with patchy alopecia on the scalp and multiple scaly lesions on both palms and soles with complete resolution of symptoms after antibiotic treatment

**Conclusion:** There remains a diagnostic dilemma in distinguishing between syphilitic alopecia and alopecia areata both clinically and on trichoscopy. Exclamation mark hair which has been previously known to be the diagnostic hallmark of alopecia areata can also be seen in syphilitic alopecia. A holistic evaluation is vital in improving diagnostic accuracy, especially in a resource-poor setting.

**Keywords:** syphilitic alopecia, trichoscopy, exclamation mark hair.

### 020: Alopecia Totalis in a 10-Year-Old Girl Successfully Treated with Tofacitinib

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Alopecia Areata (AA) is an autoimmune disorder that results from T-cell mediated attack on hair follicles. This results in rapidly developing areas of non-scarring hair loss in the scalp and beard. It can progress to total scalp hair loss (alopecia totalis) and loss of eyebrows, eyelashes, and total body hair (alopecia universalis). The prognosis varies widely, and poor outcomes are associated with an early age of onset, extensive hair loss, the ophiasis variant, nail changes, atopy, and a family history of AA. Although there are several available treatment modalities for AA, the efficacy of most of them is not satisfactory in the case of alopecia totalis. JAK Inhibitors are remarkably effective in many autoimmune diseases including AA. Herein, we report a case of alopecia totalis in a 10-year-old girl successfully treated with tofacitinib.

### SEBACEOUS GLAND DISORDERS

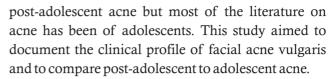
### 021: Adolescent and Post-Adolescent Acne in Skin of Colour Individuals

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Background: There is an increasing incidence of



**Methods:** Prospective study of 261 patients who had facial acne vulgaris from February 2021 to March 2022. Socio-demographic parameters, type of acne lesions, BMI, and severity of acne were noted. Acne was classified as persistent, late-onset, recurring acne, and adolescent acne. In this study, patients aged 20 years and below were regarded as having adolescent acne, and those aged 25 years and above as having post-adolescent acne. Adolescent and post-adolescent acne individuals were compared.

**Results:** The prevalence of acne was 17.2%. The population was 75.5% female with a mean age of 24.5±7.5 years. The mean age at onset of acne was  $18.1\pm6.7$  years with 69.7% having an onset at age 11-20 years. The severity of acne was mild, moderate, and severe in 44.8%, 48.3%, and 6.9% respectively. Acne was non-inflammatory in 69.7%, occurred on the whole face in 91.2%, and mean BMI± SD was  $23.6 \pm 4.5$ . Acne was adolescent in 38.7%, persistent in 27.6%, late-onset in 18.0%, and recurring in 15.7%. Differences between adolescent and post-adolescent acne included a higher BMI, inflammatory acne, and more severe acne in post-adolescent.

**Conclusion:** Acne occurs in all age groups and there are differences between adolescent and postadolescent acne. These differences should be taken into consideration during treatment.

Keywords: Acne, Adolescent, Post-adolescent, Skin of color

### 022: Prevalence of Hidradenitis Suppurativa in an African Population: Validation of a Screening Questionnaire in Lagos, Nigeria

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Background: Studies of Hidradenitis Suppurativa



(HS) studies from Africa are few. This study aimed to determine the prevalence of HS in Lagos, Nigeria, and to validate an HS screening questionnaire.

Methods: This was a cross-sectional study of 802 healthy adult Nigerians who accompanied their relations to the outpatient Family Medicine clinic and the eye clinic of the Lagos State University Teaching Hospital in Lagos, Nigeria following ethical approval. The study was conducted using a validated screening questionnaire over three months in 2022. Screenpositive participants were clinically examined. Severity was assessed using the Hurley Score.

Results: The prevalence of HS was 2.2% with no gender predominance. The median age in the HS group was 34 years (IQR 28-42), and the median BMI of the HS patients was 27.0 (IQR 21.4-28.6). There was no significant difference in BMI between the HS and control group. The screening questionnaire had a sensitivity of 1 (18/18), a specificity of 0.8 (20/25), a positive predictive value of 0.8 (18/23), and a negative predictive value of 1 (20/20). The axilla was the predominant site of affection (66.7%), and all HS patients had mild disease severity (Hurley Score I).

**Conclusion**: The prevalence of HS is high and BMI was not a risk factor. The axilla was the most affected site and the severity of HS is mild(Hurley Score I). In addition, the HS screening questionnaire is suitable for population surveys.

### 023: Clinical Profile of Hidradenitis Suppurativa in Skin of Colour Individuals

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**Background**: Hidradenitis suppurativa is an uncommon debilitating skin appendage disorder. The result of this is that documentation of its prevalence and clinical features is rare.

**Objectives**: To document the hospital prevalence of hidradenitis suppurativa and its clinical features

**Study design**: This is a retrospective case review spanning six years. Records of all patients diagnosed

with hidradenitis suppurativa at seven dermatology outpatient clinics between January 2017 and December 2022 were retrieved and relevant information was extracted using a study questionnaire.

Results: The prevalence of HS was 0.47% and the population was 75.7%. female. The age range and median (IQR) age of the patients was 12-59 years and 30 (24, 36) years. Median (IQR) age at onset was 26 (20.32) years and median (IQR) duration was 36 (12, 60) years. A delay in diagnosis was noted in 34.4%. Smoking was reported in 3 persons, acne in 29.7%, diabetes in 4.7%, and overweight/obese in 40.6%. Hidradenitis suppurativa was located in the Axilla in 85.9%, groin in 34.4%, genital in 20.3%, breast in 9.4%, buttocks in 18.8%, and atypical sites in 15.6%. Hurley stage was 0, I, II, and III in 1.6%, 42.2%, 35.9%, and 20.3% respectively.

**Conclusion**: Hidradenitis suppurativa is uncommon in Nigerians and when present is severe due to a delay in diagnosis

**Keywords**: Hidradenitis suppurativa, clinical features, Hurley's stage, co-morbidity

#### INFECTIOUS DERMATOSES

## 024: The Role of Corticosteroid in a Case of Actinomycetoma in South-West Nigeria: A Case Report

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Background: Madura foot is a rare, chronic infection of the skin and subcutaneous tissue caused by filamentous bacteria (Actinomycetoma) or fungi (Eumycetoma). It commonly presents with the triad of painless swelling, sinus formation, and discharge of granules. Steroids are not routinely recommended in the treatment but could potentially shorten the clinical course of the disease. Mycetoma can result in foot amputation if diagnosis is not promptly made or if medical treatment fails which can negatively impact the patient's quality of life.

**Case Presentation**: We report a case of a 34-year-old petty trader who presented with a one-year history of

progressive swelling and pain in the right foot with sinuses discharging pus and grains. The histopathology report and radiograph of the right foot were consistent with that of Actinomycetoma. She had the modified two-step treatment with Clotrimazole tablets 960mg twice daily and Intravenous Gentamycin 160mg daily (4 weeks) and was maintained on Doxycycline 100mg twice daily and Clotrimazole 960mg twice daily for the later 6 months. She also had a short course of prednisolone for persistent pain and swelling in the initial 2 weeks of treatment with good and sustained clinical response by the second month of treatment.

**Conclusion**: Prompt diagnosis, and use of antimicrobial combinations and steroids have proven to be effective in the management of Actinomycetoma.

**Keywords**: Madura foot, Actinomycetoma, Steroid, Treatment.

## 025: Pattern of Infective Dermatosis in Diabetic Patients in Kaduna North-western Nigeria

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Background: Diabetes mellitus is the most common metabolic disorder whose initial presentation could be suggested by either recurrent or specific skin infections. Previous studies have shown skin infections as the most prevalent skin disorder among diabetic patients, affecting about 20% of these patients. Factors implicated in the increased susceptibility of diabetic patients to skin infections include hyperglycemia, immune dysfunction, microangiopathy, and macroangiopathy.

Aims and objectives: This study aimed to determine the spectrum of infections among Diabetic patients and the factors influencing their occurrence.

Materials and method: This was a cross-sectional study conducted at the medical outpatient clinic at BDTH Kaduna. Diabetics with skin disorders attending the clinic from June to July 2022 were included in this study. Records of the patient's age, sex, fasting blood sugar, body mass index, and duration of diabetes were documented. An evaluation of the type of skin infection was made clinically and confirmed in the laboratory in some cases. Data was analyzed using IBM SPSS Statistics version 25.

**Results**: A total of 125 diabetic patients were seen during the period. Thirty- five (28%) of the patients had skin infections,15 (42.9%) of whom had fungal infections. There was no significant relationship between skin infections, blood sugar, body mass index, and waist circumference.

**Conclusion**: Dermatophytes and candida infections are very common in diabetics. These commonly affect areas where there is close apposition of skin; as such these areas should be examined during routine clinic visits.

Keywords: Infective dermatosis, Diabetics, Pattern

# 026: Case Report: Atypical Presentation of Varicella as Acute Abdomen, Thrombocytopenia and ARDS in an Immunocompetent Adult

**Introduction**: Varicella (chickenpox) is an infectious disease caused by the varicella zoster virus.

The incidence of chickenpox in adults has increased in recent years, with an attendant increment in morbidity and mortality. Pneumonia is a serious complication of varicella infection in adults usually seen in immunocompromised patients with a need for mechanical ventilatory support. Varicella can also present atypically with intestinal obstruction and peritonitis. We report a case of a 32-year-old immunocompetent adult with no identifiable risk factor who was referred to the general surgeons and Infectious diseases unit. Presenting symptoms were features of intestinal obstruction and atypical skin lesions, he developed thrombocytopenia, varicella pneumonia, and ARDS. Presenting symptoms were generalized vesicular, itchy rash involving the palms of two days



duration which was preceded by a four-day history of generalized abdominal pain, inability to pass stool, and fever. There was no history of contact or recent travel.

On examination, the patient had pyrexia with generalized vesicular rash at different stages of development with hemorrhagic crust. There was no peripheral lymphadenopathy. Abdomen was full, and mildly tender with diminished bowel sound, He developed acute onset breathlessness two days after admission and succumbed to the illness despite medical intervention.

### 027: Infectious Skin Disease Profile of Children Attending the Paediatric Dermatology Clinic at the University of Port Harcourt Teaching Hospital, Port Harcourt

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**Background**: Infectious skin diseases (ISDs) are common among children in our environment.

They constitute an important cause of morbidity in affected children.

**Objective/Aim**: To describe the prevalence and pattern of ISDs seen in our practice.

**Methods:** This was a prospective descriptive study of consecutive children aged 0-17 years presenting at the Paediatric dermatology clinic in UPTH over a two (2) year period (January 2021 – December 2022).

**Results**: Out of the 651 children seen within the period under review, 184(28.3%) had ISDs. The mean age of the children with ISDs was  $5.3 \pm 1.8$  years with a male-to-female ratio of 1.1:1. Fungal skin infections were seen in 59 (32.1%) children. Parasitic skin infections were found in 57 (31%) patients while viral and bacterial skin infections were diagnosed in 49 (26.6%) and 19 (10.3%) patients respectively. Based on the aetiologic group, the most frequently occurring ISDs were: Scabies in 52 (28.3%); Dermatophytoses in 32 (17.4%); Hand, foot, and mouth disease in 17 (9.2%), and Impetigo in 14 (7.6%).

**Conclusion**: Infectious skin diseases were common in our practice with Scabies and Dermatophytoses

being the most common. There is a need for continued efforts to strengthen the prevention as well as early diagnosis and prompt treatment of ISDs to limit the morbidity associated with them.

**Keywords**: Infectious, Skin Diseases, Children, Port Harcourt.

## 028: Coinfection of Monkeypox (Mpox) and Chickenpox in an Immune-Compromised Adult Nigerian

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Monkeypox virus is an orthopox virus that is endemic in Central and West Africa. Its presentation is often confused with other rash illnesses such as Smallpox, Chickenpox, Measles, Scabies, and drug-associated allergies. A laboratory test is needed for a definitive diagnosis.

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We describe a case of coinfection of Monkeypox with Chickenpox in an immunocompromised adult in Nigeria and highlight its severity.

**Keywords**: Monkeypox, Chickenpox, Immunocompromise.

### 029: Disseminated Kaposi Sarcoma without Cutaneous Involvement

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Background: In 1872, Moritz Kaposi first described Kaposi sarcoma (KS) as an idiopathic multiple-pigmented sarcoma of the skin. Over the decades, KS has been classified into classic, endemic, iatrogenic, and AIDS-associated with the AIDS-associated KS being the most common. The cutaneous features of KS are so characteristic; purplish, reddish blue, dark black macules, plaques, and nodules, that in the absence of cutaneous involvement, make the diagnosis of KS very cryptic. This can result in

delayed diagnosis and an increase in morbidity and mortality, especially in immunocompromised patients.

**Methods:** We describe a patient with disseminated AIDS-associated KS without the characteristic cutaneous manifestations.

Results: A 23-year-old female student presented with a six-month history of recurrent cough, multiple swellings around the head and neck, and a monthlong history of bilateral leg swelling. She was diagnosed with HIV infection 3 months before presentation and commenced on ART but stopped due to poor tolerance. Clinical examination and preliminary investigations showed the involvement of the lung, lymph nodes, and pericardium. She was being managed for disseminated tuberculosis before the result of a lymph node biopsy revealed KS. In a large cohort of 5932 HIV-infected patients reported in the literature, 319 were identified with KS. Only 11 of the patients with KS (5.4%) had non-cutaneous involvement.

Conclusion: Non-cutaneous KS is easily misdiagnosed in HIV patients. This is because of their susceptibility to opportunistic as well as typical infections. This case highlights the need to expand and effectively rule out differential diagnosis in HIV/AIDS patients especially when they are unresponsive to treatment.

**Keywords**: AIDS-associated KS, non-cutaneous involvement, lymphadenopathy.

030: Knowledge of Nigerian Health Workers about Skin Neglected Tropical Diseases – The Need to Bridge the Gap

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**Background**: Nigeria carries a significant burden of Neglected Tropical Diseases (NTDs) in

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Africa with an estimated 25% of all cases. Ten of the WHO-recognised NTDs are characterized by cutaneous manifestations. They are known as skin NTDs and some are prevalent in Nigeria. However, due to the limitations of diagnostic capabilities, they often remain undiagnosed, untreated, and unreported.

**Objectives**: This study aimed to assess the knowledge and perceptions of health workers in Nigeria regarding skin NTDs.

Methods: A cross-sectional observational study was conducted using data collected from the online (Google) registration form of an ongoing virtual skin NTD course. The form included demographic and occupational information, as well as ten questions rated over ten on skin NTDs. Microsoft Excel and Google Sheets were utilized for data analysis.

Results: A total of 871 health workers registered for the course and 52.7% were females. Of the participants, 54% were medical doctors, 11.5% were community health workers, 9% were nurses and another 9% were pharmacists. The overall average score for the pretest was 7.4 out of 10. Medical doctors had the highest average score of 7.9/10, whereas nurses had the lowest average score of 5.8/10.

**Conclusion**: Overall, the knowledge of health workers about skin NTDs was found to be above average. However, there was a significant knowledge gap among some cadres of health workers. Bridging this gap requires improving the diagnostic abilities of primary care providers, which is key to the effective management and control of skin NTDs in Nigeria.

**Keywords**: skin NTDs, dermatology education, health workers



## 031: Cutaneous Aspergillosis in an Indian Immigrant in Nigeria Immunocompetent Male-A Case Report.

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Background: Aspergillosis is caused by Aspergillus species which are ubiquitous molds found in our environment. It primarily affects the lungs but can disseminate to other organs causing syndromes like cutaneous aspergillosis. Primary cutaneous aspergillosis may also occur usually following traumatic inoculation. We present a 37-year-old man with a two-month history of generalized rash. Culture of skin lesions yielded Aspergillus niger. The patient was commenced on itraconazole which was followed by a resolution of rashes a month into therapy. Disseminated aspergillosis is commonly encountered in the immunocompromised but our patient was immunocompetent, HIV-negative, and had no other underlying morbidities. This increases the need for a high index of suspicion of fungal diseases in skin conditions at the outset when patients present regardless of their immune status.

ECZEMATOUS DERMATITIS

### 032: Napkin Dermatitis: Skin Hydration Levels and Skin Care Practices amongst Children at Urban Comprehensive Health Centre, Ile-Ife, Nigeria

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**Introduction**: Napkin dermatitis (ND) means skin inflammation occurring within the napkin area. Skin care practices and skin hydration levels (SHL) are parameters of interest in the pathogenesis of ND.

**Aim and objectives**: To compare napkin area skin care practices and levels of skin hydration in children with ND and those without ND and to determine the predictors of ND in children.

Methods: This was a case-control study of 60 participants with ND and 60 age and sex-matched controls without ND, aged below 12 months that used napkins. Information on napkin area skin care practices was obtained from parents and diagnosis of ND was made clinically. Skin hydration levels were measured using a Corneometer®.

**Results**: The median age of children was  $16 \pm 17.1$  weeks (range 2-48 weeks). Controls were more likely to use appropriate barrier agents compared with participants with ND (71.7% vs. 33.3%; p<0.001). There was no significant difference in the mean SHL  $\pm$  SD of participants with ND and controls on the non-lesional (buttock) area (42.00  $\pm$  19.71 vs. 43.46  $\pm$  21.68; t=-0.384, p=0.702). Controls who always used a barrier agent were 83% less likely to have ND than those who did sometimes and those who never used a barrier agent (OR: 0.168, CI: 0.064 - 0.445, p<0.001).

**Conclusion:** Consistent use of an appropriate barrier agent could be protective against ND.

### 033: Erythroderma as a Manifestation of Hypereosinophilic Syndrome: A Case Report

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Background: Hypereosinophilic syndrome is characterized as persistent eosinophilia (absolute eosinophil count ≥ 1500 cells/uL) for more than six months, linked with organ involvement, excluding secondary causes. It is an uncommon, potentially fatal disease that should be evaluated in cutaneous diseases associated with hypereosinophilia. Early recognition and treatment are essential to prevent morbidity and mortality.

Case Report: We report the case of a 34-year-old male, who presented with a 3-month history of generalized exfoliative dermatitis, it was said to have started as generalized papules, which subsequently began to exfoliate. There was a history of associated swelling of the hands and face. He had a preceding history of fever, and weight loss before the onset of skin lesions. He also had accompanying pruritus. On examination, he had hyperpigmented plaques, with marked scaling and crusting, affecting up to 90% of BSA. There was involvement of the palms, soles, eyelids, and lips. He had lymphadenopathy (axillary, inguinal, epitrochlear, and supraclavicular groups), hepatosplenomegaly, and pleural effusion.

Skin histology showed pockets of inflammatory cells, and peripheral blood film showed an absolute eosinophil count of up to 23157 cells/uL, marked leucocytosis 74.7 x 109/L. Bone marrow histology showed marked cellularity, with an abundance of myeloid cells, and increased eosinophils (up to 20% of marrow element), all maturing in series and sequence.

Immunohistochemistry was strongly positive for CD99, Stool microscopy was negative for parasites and/or ova. He was commenced on tabs of prednisolone 60mg daily, emollients, and IV fluids with topical steroids, the patient however deteriorated while on admission and died.

**Conclusion**: Hypereosinophilic syndrome can have a range of cutaneous manifestations, among which is erythroderma. A thorough workup is needed for every presentation to avoid missed diagnoses and enable prompt treatment.

### 034: A Three-Year-Old Boy with Ricketts and Atopic Dermatitis

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**Introduction**: Ricketts is a condition associated with impairment of bone mineralization and it occurs uniquely in children and adolescents. This is due to the low extracellular concentration of calcium and phosphate ions. The causes include reduced synthesis of 1,25 dihydroxyvitamin D, hypocalcemia, and vitamin D-dependent ricket. The skin is important in

vitamin D synthesis and severe skin disease can predispose to ricketts.

**Methods**: Here we present a three-year-old with Ricketts and atopic dermatitis and delayed milestones.

**Conclusion**: Ricketts and atopic dermatitis can occur in children and can have a lot of impact on the child's and parent's lives.

Keywords: Ricketts, Atopic dermatitis, Children

#### CUTANEOUS MALIGNANCIES

### 035: Eccrine Angiomatous Hamartoma in an Adolescent Girl

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Introduction: Eccrine angiomatous hamartoma (EAH) is a rare benign malformation characterized by a proliferation of eccrine glands and capillary vessels with a predominantly congenital and adolescent occurrence. Eccrine angiomatous hamartoma is diagnosed based on its histopathological features.

Case report: We report the case of eccrine angiomatous hamartoma in a thirteen-year-old girl who was attended to at our clinic with a one-year history of painful plaques, patches, and hyperhidrosis on the left leg. She had a history of surgery on the same leg at the age of two years for an unknown indication by the mother with poor healing necessitating the use of crutches. Histopathological evaluation revealed a dermal proliferation of eccrine glands admixed with ectatic blood vessels. Therapeutic options in EAH include Lasers, botulinum toxin injection, and surgical excision. Our patient was offered surgery.

**Conclusion**: The prognosis for EAH is good: no malignant transformation although spontaneous regression does not occur. We have reported this case to highlight the importance of histopathology in the diagnosis of EAH.

**Keywords**: eccrine angiomatous hamartoma, telangiectasia, eccrine harmatomas



### 036: Fungating Diabetic Leg Ulcer: An Unusual Presentation of Mycoses Fungoides

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Introduction: Diabetic leg ulcers are a common complication of diabetes that can lead to significant morbidity and mortality if left untreated. These ulcers typically result from poor circulation and nerve damage, which can lead to reduced sensation and an increased risk of infection. On the other hand, mycosis fungoides a type of cutaneous T-cell lymphoma, although shown to be associated with metabolic disorders like Diabetes mellitus, is not commonly known to present as a diabetic leg ulcer.

Case Summary: In this report, we present a unique case of a 72-year-old woman known to have had Type 2 diabetes mellitus for the past 8 years with an index 2-year history of a fungating diabetic leg ulcer that was subsequently diagnosed as mycosis fungoides. We describe her clinical presentation, and diagnostic workup- highlighting the challenges in the diagnosis and treatment of this rare condition.

**Conclusion**: This case report underscores the importance of considering unusual etiologies in the setting of chronic or non-healing diabetic ulcers, particularly in cases with atypical or refractory features.

**Keywords**: Fungating, diabetic leg ulcer, mycosis fungoides

### 037: A Case of Malignant Peripheral Nerve Sheath Tumor: Emphasis on the Need for Follow-Up on Neurofibromatosis

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Background: Neurofibromatosis is an autosomal dominant neurocutaneous disorder. The neurofibromas are usually of cosmetic concern, they can however compress vital structures and also undergo a malignant transformation (malignant peripheral nerve sheath tumour). Malignant peripheral nerve sheath tumours mostly arise from plexiform neurofibromas. It should be suspected when a neurofibroma begins to grow rapidly in size and becomes warm to touch, tender, or warm to touch. The diagnosis is usually confirmed by taking a biopsy of the lesion.

Case Report: A 40-year-old female, diagnosed with Type 1 neurofibromatosis since childhood. She presented with an 8-month history of the rapid growth of the lumbar plexiform neurofibroma with tenderness, ulceration, and purulent discharge. Examination revealed a young woman with bilateral scoliosis, multiple café-au-lait macules, left axillary freckling, cutaneous and subcutaneous neurofibromas, and a plexiform neurofibroma in the thoracic region. She has a dome-shaped lumbar mass measuring 15cm×10cm×15cm, tender, warm with ulceration at the top and purulent discharge.

**Result**: The patient had a trucut biopsy of the lesion that revealed a low-grade malignant peripheral nerve sheath tumour.

**Conclusion**: Malignant peripheral nerve sheath tumours can arise from a plexiform neurofibroma. The lifetime risk for its development is 13% and the prognosis is very poor, hence the need for continuous monitoring of individuals with neurofibromatosis for prompt diagnosis and treatment of a malignant transformation.

**Keywords**: Malignant nerve sheath tumour, Neurofibromatosis, follow-up, biopsy.

038: Non-Melanoma Skin Cancer in a 32 year Old Living with Albinism: A Case Report with Clinical, Dermoscopic and Histopathologic Correlates

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Background: Tumors composed of premalignant and malignant keratinocytes account for morbidity and some mortality in patients living with albinism. Due to the reduction or absence of melanin, albinos are highly susceptible to the harmful effects of ultraviolet radiation and are at increased risk of actinic damage and non-melanoma skin cancer. Approximately 75–80% of these malignancies are Basal cell carcinomas and up to 25% are Squamous cell carcinomas.

Ultraviolet rays can cause damage to exposed body parts, such as the face, ears, neck, and shoulders. Skin lesions include sunburn, blisters, solar elastosis/keratosis, ephelides, lentigo, and non-melanoma skin cancer. In these patients, they are multiple and biologically aggressive. They typically occur on the head or neck, areas usually more exposed to solar radiation. The extent of DNA damage can exceed the repair, with a major risk of malignant transformation. Reduced visual acuity, refractive errors, iris translucency, nystagmus, foveal hypoplasia, fundus hypopigmentation, and abnormal decussation of optic nerve fibers at the chiasm are common eye features in patients living with albinism.

The risk of skin cancer is increased in albinos who are ignorant about their condition, do not practice photoprotection, and are proportional to the accumulated amount of ultraviolet radiation absorbed by the keratinocytes; the potential for malignant alteration is determined by the number of genetic insults. Thus, a high frequency of shorter

exposures to sunlight is more likely to be carcinogenic than less frequent longer exposures since each exposure event can potentially cause a change. The more genetic alterations that occur, the greater the chances of malignant transformation.

Case Report: We present the case of a 32-year-old Nigerian female, single, sports bet agent, living with albinism and chronic non-protective photo exposure who presented to the Dermatology clinic with a fouryear history of a large nodule with a variegated appearance on the right temporal region and ulcerated plaques on the left temporal region, posterior auricle and dorsum of the right foot. There are also multiple hyperpigmented patches and erythematous plaques on the forehead, décolleté, upper limbs, and back. Dermoscopy showed a pigment network with globules, blue-grey pigmentation, and ulceration. Multiple excision biopsies with flaps and split-thickness skin grafts were done. Histopathology showed skin with epidermal ulceration. The dermis is infiltrated by epithelial cells arranged as nests and trabeculae with keratin pearl formation as well as foci of necrosis. The malignant cells have pleomorphic, hyperchromatic nuclei with increased nucleo-cytoplasmic ratio and eosinophilic cytoplasm. The stroma is fibrocollagenous and infiltrated by chronic inflammatory cells. The resection margins are free of tumour cells. The diagnosis is Squamous cell carcinoma.

Conclusion: Squamous cell carcinoma in patients living with albinism may develop de novo or from premalignant actinic keratosis, in which keratinocytes can undergo initial transformation induced by ultraviolet radiation. These lesions cause the patient to undergo multiple treatments, surgeries, and even disfigurements, which could be averted through prevention or early intervention. Given the high sensitivity of patients living with albinism to ultraviolet light, they need counseling, integration into support groups, total sun protection, and should undergo regular skin exams every six months or less.

**Keywords**: Albinism, Ultraviolet light, Squamous cell carcinoma



#### OTHERS

### 039: Pyostomatitis – Pyodermatitis Vegetans Unveiling Cryptic Inflammatory Bowel Disease

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Background: Pyostomatitis-pyodermatitis vegetans is a rare condition associated with inflammatory bowel disease (IBD) in 75% of cases. It is a chronic inflammatory dermatitis characterized by pustular and vegetating mucocutaneous lesions. Vegetating plaques involve intertriginous areas of the skin while miliary pustules are seen in the oral mucosa. Extraintestinal manifestations complicate IBD in up to 40% of cases. The skin is one of the most commonly involved organs in greater than 10% of cases. The most common mucocutaneous lesions associated with IBD are erythema nodosum, pyoderma gangrenosum, and aphthous stomatitis.

**Observation**: A 23-year-old blue-collar worker, with a progressively evolving rash, which started on the upper lip, and involved the tongue and gingivae. The attendant swelling and painful fissures on the lower lip led to marked disfigurement which resulted in job loss. There were associated skin lesions on the buttocks and legs. Further probing revealed a history of weight loss and recurrent diarrhea. A thorough search of available literature shows IBD to be a rare, but progressively increasing disease entity in Nigeria, with only a solitary report of pyostomatitis vegetans without attendant skin lesions.

Key message: To highlight the rarity of pyostomatitispyodermatitis, and its role in unveiling a cryptic IBD; to emphasize the diagnostic challenges and psychosocial consequences of skin diseases in comparison to the often more common ominous underlying disease. We report this case to draw attention to a rare condition that may be the only presenting feature in the early or preclinical stage of inflammatory bowel disease.

### 040: Extensive Annular Cutaneous Sarcoidosis in a Young Nigerian Woman

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**Background**: Sarcoidosis is a granulomatous disorder of unknown etiology. Cutaneous involvement can occur either in isolation or in up to 25-35 % of multisystemic disease. The different cutaneous features of sarcoidosis make it a common differential diagnosis of various dermatoses. We report a case of extensive annular sarcoidosis with significant psychological effects in a young Nigerian woman.

Case report: A 20-year-old female presented with multiple annular rashes, which had been progressive for over 4 years. There were no other associated cutaneous or systemic symptoms. However, she had associated psychological effects. Examination revealed multiple erythematous, annular patches and plaques, and nodules on the face, ears, trunk, and extremities. Cutaneous sensation was preserved in affected areas. The differential diagnosis at presentation included generalized granuloma annulare (GGA), urticarial vasculitis, leprosy, and cutaneous sarcoidosis. The histology findings were consistent with a non-caseating granulomatous inflammation. Follow-up ophthalmologic assessment, chest x-ray, serum calcium, and other ancillary blood tests were unremarkable. A final diagnosis of cutaneous sarcoidosis was made. Treatment with oral prednisolone led to complete resolution of the lesions.

**Conclusion:** Sarcoidosis should be considered in the differential diagnosis of annular skin lesions. Early biopsy for confirmation of diagnosis and treatment will reduce the associated burden of the disease.

**Keywords**: cutaneous sarcoidosis, annular lesions, granulomas.

### 041: Pyoderma Gangrenosum – A Case Report

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diagnostic test.

Background: Pyoderma Gangrenosum (PG) is an Uncommon Neutrophilic Dermatoses that presents as an Auto-Inflammatory and Ulcerative Disorder of the Skin. It has an estimated incidence of 3-10 cases per million people per year. It is more common in young and middle-aged people, average age of onset-40-60 years, although it can affect children. It has female preponderance and is characterized by painful papule, plaque or pustule that rapidly ulcerate with raised undermined borders on sites of normal or traumatized skin. It has no Pathognomonic

Case report: A 67-year-old woman, Retired Immigration Officer, known to be living with Rheumatoid arthritis -38 years, Hypertension-15 years respectively. She presented on account of a 1-week history of painful right leg ulcers, which were initially managed on outpatient basis with no improvement. Upon presentation, with detailed history, physical examination, and histopathology, the diagnosis of Pyoderma Gangrenosum was confirmed. She made significant improvement following the commencement of Immunosuppressive (corticosteroid).

Conclusion: Pyoderma Gangrenosum (PG) is characterized by painful necrotic ulceration to previously normal or traumatized sites of trauma. It is associated with Pathergy and systemic Diseases (Rheumatoid Arthritis), amongst others. It is often misdiagnosed, early recognition and prompt management with immunosuppressive therapy are essential to improve the quality of life of affected individuals.

**Keywords**: Pyoderma Gangrenosum, Neutrophilic, Dermatosis, Auto-Inflammatory, Pathognomonic, Pathergy

### 042: Managing Pellagra in a Resource-Poor Setting

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**Background**: Pellagra is a multisystemic syndrome caused by a deficiency of niacin. Despite a potentially fatal outcome, diagnosis and cure are achievable, even in resource-poor settings. We report a case of clinically diagnosed pellagra in a woman who improved on an available multivitamin that had a suboptimal dose of niacin.

**Case report**: A 42-year-old nomadic woman with a 4-year history of expanding well-demarcated scaly plaques, erosions, and ulceration on the lower neck and extremities.

Systemic review was significant for weight loss, diarrhoea, malaise, and episodic amnesia. Her diet over the years was corn-based. A diagnosis of pellagra was made based on the described 'Casal's necklace', photosensitive distribution of skin lesions, and other symptoms. Ancillary blood work was unremarkable and confirmatory assays for niacin deficiency were pended by limited resources. In contrast to the standard daily dosing of 300mg of niacin prescribed, she opted for an available over-the-counter multivitamin supplement that offered 36 mg of niacin daily. All symptoms improved within 2 weeks. She was maintained on the multivitamins and advised on dietary changes.

**Conclusion**: Considering the progression and fatal outcome of untreated pellagra, clinical diagnosis, and available niacin supplementation can be explored in resource-poor settings, where standard laboratory diagnosis and care are unavailable.

Keywords: Pellagra, niacin, casal's necklace



#### 043: A Case of Familial Lichen Planus

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Background: Lichen planus is a cell-mediated immune response of unknown origin. It may be found with other diseases of altered immunity, such as ulcerative colitis, alopecia areata, vitiligo, dermatomyositis, morphea, lichen sclerosis, and myasthenia gravis. A rare type of lichen planus, familial bullous lichen planus, could be gene-related. It may be triggered by diuretics and antimalarials, metal fillings (causing oral lichen planus), stress, and infection. Lichen planus is associated with hepatitis C virus infection. Lichen planus is a non-infectious, itchy rash that can affect many areas of the body. Affected areas include the arms, legs, trunk, mouth (oral lichen planus), nails, and scalp. vulva, vagina, and penis. Lichen planus is thought to affect 1-2% of the worldwide population. It's more common in adults over the age of 40. Lichen planus of the skin affects men and women equally. However, oral lichen planus is more common in women. The mouth is affected in around 50% of all cases of lichen planus (oral lichen planus). Some physicians describe lichen planus with the six "Ps": pruritic, polygonal, planar (flat-topped), purple papules, and plaques. Some patients may be asymptomatic, and most experience intense pruritus, a hallmark of lichen planus. The exact cause of lichen planus is unknown. However, the condition isn't infectious and doesn't usually run in families. It can't be passed on to other people, including sexual partners.

Case summary: however, our case is a 23-year-old male who presented with skin lesions of 2 years duration associated with itching grade 5/10 located on the trunk and extremities. Patient-related symptoms as a cause of swimming in dirty rivers. On examination, hyperpigmented hypertrophic plaques were located sparsely on the trunk and extensor surfaces of the limbs. The father and his younger brother have similar lesions. Possible differentials entertained were lichen planus, psoriasis, cutaneous tuberculosis, and tertiary syphilis. Punch skin biopsy for histopathological study, showed hyperkeratosis, hypergranulosis, acanthosis, and pseudoepitheliomatous hyperplasia with saw-toothed

elongated rete ridges. There are dermo-epidermal chronic inflammatory infiltrates most of which are perivascular. They are composed of mainly lymphocytes. There are melanin deposits on the papillary dermis and among the inflammatory cells. Based on this a diagnosis of lichen planus was made. He is currently on topical corticosteroid ointment.

**Conclusion**: Thus, lichen planus can be familial and the percentage of familial lichen planus may be more than 2% as reported in previous studies.

### 044: Cronkhite-Canada Syndrome: Sudden Unexpected Fatality in a Black Female

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Background: Cronkhite-Canada syndrome (CCS) is a rare non-inherited disorder with dramatic gastrointestinal and dermatological manifestations. It is characterized by the presence of hamartomatous polyps in the gut, and a triad of cutaneous hyperpigmentation, alopecia, and nail dystrophy. Here we report a classic case of CCS but with delayed diagnosis and sudden unexpected fatality within eighteen (18) months. We discuss the clinical and endoscopic findings; diagnostic challenges, and probable cause of death.

Case presentation: A 52-year-old woman had been seen by several specialists with a constellation of symptoms including darkening of the skin, generalized abdominal cramps, hair loss, nail changes, the passage of blood in stool, diarrhoea, vomiting, weight loss, and marked oedema of the limbs. Diagnosis entertained ranged from adrenal disease, and haemochromatosis, through metastatic disease (probably colonic), to multiple endocrine neoplasias. She was serendipitously seen by the dermatologist about six months later, at which time the skin manifestations had resolved, but she had lost considerable weight (17kg in two months), with recurrent episodes of anaemia necessitating blood transfusions. A diagnosis of CCS was made following oesophagogastroscopy, and the patient was placed on corticosteroid. She defaulted and died within a year of the diagnosis.

**Conclusion**: To our knowledge, this is the first

reported case of CCS in Nigeria. It is presented to sensitize dermatologists about CCS; and highlight the challenge of lack of prompt referral of skin-related cases to the dermatologist. It also seeks to explore the probable cause of death.

**Keywords**: Cronkhite-Canada syndrome, Nigerian, diagnostic delay.

045: Assessment of Knowledge, Attitude, and Use of Sunscreen Among Health Workers in Abakaliki, Ebonyi State

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Background: Sunscreen is vital for protecting the skin from harmful UV radiation and associated health risks like skin cancer and premature aging. Previous research in Nigeria has mainly focused on specific groups, leaving a gap in understanding sunscreen use among healthcare workers. This study aims to bridge this gap, identify areas for improvement, and enhance sun safety practices among healthcare workers in Abakaliki, Ebonyi State, to ultimately improve public education on sunscreens. However, little is known about the knowledge, attitudes, and practices of sunscreen use among healthcare workers.

**Methods**: Data was collected using an online pretested questionnaire on socio-demographic parameters of participants, knowledge, attitude towards sunscreens, use of sunscreen, and factors that affect its use.

**Results**: A total of 165 respondents, female: 60.6%, males: 39.4%, with a mean age of 39.6 years, the majority of whom were Doctors working in tertiary public hospitals. 26.1%

heard of sunscreens on social media while 15.2% were taught in school. Although 97% had heard of sunscreens, only 40% use sunscreens and more than

half of these apply "when they remember". The high cost of sunscreens and lack of time were cited as 'reservations' to sunscreen use.

**Conclusion**: This study highlights the low utilization of sunscreen among healthcare workers in Abakaliki, Ebonyi State, despite high awareness. Factors such as cost and lack of time hinder sunscreen use. Interventions should address these barriers and provide comprehensive education to improve sun safety practices.

Keywords: Health workers, Sunscreen, Ebonyi,

